

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRII  
(Other instructions  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	2. NAME OF OPERATOR Damson Oil Corporation	3. ADDRESS OF OPERATOR 3300 N "A" Bldg 8, Suite 100	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) At surface Unit G, 1980' FNL & 1980' FEL Sec 14, T19S, R31E	5. LEASE DESIGNATION AND SERIAL NO. NM-0557148	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Sweeney Federal	9. WELL NO. 1	10. FIELD AND POOL, OR WILDCAT Lusk (Strawn)	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 14, T19S, R31E	12. COUNTY OR PARISH Eddy	13. STATE NM
14. PERMIT NO. n/a	15. ELEVATIONS (Show whether DP, RT, CL, etc.) 3535.4' GR											

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF  
FRACTURE TREAT  
SHOOT OR ACIDIZE  
REPAIR WELL  
(Other)

CELL OR ALTER CASING  
MULTIPLE COMPLETE  
ABANDON\*  
CHANGE PLANE

<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF  
FRACTURE TREATMENT  
SHOOTING OR ACIDIZING  
(Other)

REPAIRING WELL  
ALTERING CASING  
ABANDONMENT\*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

\* NU BOP

- 1) RIH w/4-1/2" CIBP & set @ 11,100'±. Circ hole w/gelled brine water. Cap CIBP w/25' of cmt. 50'
- 2) TIH w/4-1/2" freepoint tool. Determine freepoint of 4-1/2" csg. Chemical cut 4-1/2" casing 100' above freepoint. T00H w/4-1/2" csg.
- 3) TIH w/8-5/8" freepoint tool. Determine freepoint of 8-5/8" csg. Chemical cut 8-5/8" casing 100' above freepoint. T00H w/8-5/8" csg.
- 4) TIH w/tubing to 50' below depth of 4-1/2" casing cut. Spot 100' cement plug across 4-1/2" casing stub. [TAG]
- 5) Pull tubing up to 4061'. Spot 100' cement plug across 8-5/8" casing shoe @ 4011'. [TAG]
- 6) Pull tubing up to a point 50' below depth of 8-5/8" casing cut. Spot 100' cement plug across 8-5/8" casing stub. [TAG]
- 7) Pull tubing up to 675'. Spot 100' cement plug across 13-3/8" casing shoe @ 625'. [TAG]
- 8) Pull tubing up to 30' from surface. Spot 30' cement plug to surface. T00H w/tubing. Fill casing to surface w/cement. 50'
- 9) Install dryhole marker and restore location.

[REDACTED]

→ spot 100' cmt. @ top of Bone Spring (≈ 6900'). (SJS)

\* Additions/Deletions as per telecon w/D.R. Craig on 10/24/89 (SJS)

18. I hereby certify that the foregoing is true and correct

SIGNED

Donald R. Craig  
D. R. Craig

TITLE

District Engineer

DATE

10-9-89

(This space for Federal or State office use)

Orig. Signed by Shannon J. Shoy

RECEIVED BY

APPROVED BY

TITLE

DATE

10-26-89

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side